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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**☐ Declaration Submitted with Initial Filing
OR
☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number 1/1390,1418

First Named Inventor Joerg KLEY

COMPLETE IF KNOWN

Application Number 10 / 656,863

Filing Date 09/05/2003

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Indolinones Substituted By Heterocycles, The Preparation Thereof And Their Use As Medicaments☐ the specification of which (Title of the invention)☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 09/05/2003 as United States Application Number or PCT International

Application Number 10/656,863 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
DE 102 42 350.4	Germany	09/12/2002	<input type="checkbox"/>	YES	NO
DE 102 52 969.8	Germany	11/14/2002	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/414,938	09/30/2002	
60/430,790	12/04/2002	

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 35(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Name	Registration Number	Name	Registration Number
Robert P. Raymond	26,089	Susan K. Pocchiari	45,018
Alan R. Stempel	28,991	Philip I. Datlow	41,482
Mary-Ellen M. Devlin	27,928	Timothy X. Witkowski	40,232
Anthony P. Bottino	41,629	David A. Dow	46,124

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label **28501** OR ☐ Correspondence address below

Name			
Address			
Address			
City	State	ZIP	
Country	Telephone	Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Joerg		KLEY	
Inventor's Signature	Date		11/06/03
Residence: City	Mittelbiberach	State	Country Germany
Post Office Address	Poststrasse 5/4		
Post Office Address			
City	Mittelbiberach	State	ZIP 88441
		Country	Germany

☒ Additional inventors are being named on the 3 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

Please type a plus sign (+) inside this box → ☐

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>3</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Frank		HILBERG	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Wien		Austria	DE
Mailing Address			
Pilgramgasse 18/22			
Mailing Address			
City	State	ZIP	Country
Wien		A-1050	Austria
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Armin		HECKEL	
Inventor's Signature		Date	
<i>Armin Heckel</i>		12/10/2003	
Residence: City	State	Country	Citizenship
Biberach		Germany	DE
Mailing Address			
Geschwister-Scholl-Strasse 71			
Mailing Address			
City	State	ZIP	Country
Biberach		88400	Germany
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Gerald Juergen		ROTH	
Inventor's Signature		Date	
<i>Gerald ROTH</i>		11/10/03	
Residence: City	State	Country	Citizenship
Biberach		Germany	DE
Mailing Address			
Akazienweg 47			
Mailing Address			
City	State	ZIP	Country
Biberach		88400	Germany

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Case No. 1/1390,1416

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>2</u> of <u>3</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Thorsten		LEHMANN-LINTZ	
Inventor's Signature <i>Thorsten</i>		Date <i>11/06/2003</i>	
Residence: City Ochsenhausen	State	Country Germany	Citizenship DE
Mailing Address Arneisenberg 1			
Mailing Address			
City Ochsenhausen	State	ZIP 88416	Country Germany
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Ralf R. H.		LOTZ	
Inventor's Signature <i>Ralf</i>		Date <i>11/06/2003</i>	
Residence: City Schemmerhofen	State	Country Germany	Citizenship DE
Mailing Address Schluslerstr. 28			
Mailing Address			
City Schemmerhofen	State	ZIP 88433	Country Germany
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Ulrike		TONTSCH-GRUNT	
Inventor's Signature		Date	
Residence: City Baden	State	Country Austria	Citizenship AT
Mailing Address Oetkerweg 23			
Mailing Address			
City Baden	State	ZIP A-2500	Country Austria

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DECLARATION
ADDITIONAL INVENTOR(S)
 Supplemental Sheet
 Page 3 of 3

Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Jacobus C. A.		VAN MEEL	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Moedling		Austria	NL
Mailing Address			
Weisses Kreuz Gasse 61			
Mailing Address			
City	State	ZIP	Country
Moedling		A-2340	Austria
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing OR ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number 1/1390,1416

First Named Inventor Joerg KLEY

COMPLETE IF KNOWN

Application Number 10 / 856,863

Filing Date 09/05/2003

Group Art Unit

Examiner Name

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
DE 102 42 350.4	Germany	09/12/2002	<input type="checkbox"/>	YES	NO
DE 102 52 969.8	Germany	11/14/2002	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 116(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
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60/430,790	12/04/2002	

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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

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 Number Bar Code
 Label here

Name	Registration Number	Name	Registration Number
Robert P. Raymond	25,089	Susan K. Pochiani	45,016
Alan R. Stempel	28,991	Philip I. Datlow	41,482
Mary-Ellen M. Devlin	27,928	Timothy X. Witkowski	40,232
Anthony P. Bottino	41,629	David A. Dow	46,124

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label 28501 OR ☐ Correspondence address below

Name					
Address					
Address					
City		State		ZIP	
Country		Telephone		Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such wilful false statements may jeopardize the validity of the application of any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))	Family Name or Surname
Joerg	KLEY

Inventor's Signature					Date		
Residence: City	Mittelbiberach	State		Country	Germany	Citizenship	DE
Post Office Address	Poststrasse 5/4						
Post Office Address							
City	Mittelbiberach	State		ZIP	88441	Country	Germany

☒ Additional inventors are being named on the 3 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

Please type a plus sign (+) inside this box ☐

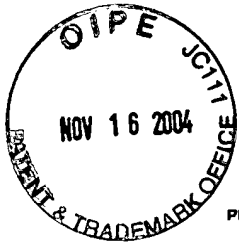
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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>3</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Frank		HILBERG	
Inventor's Signature <i>Frank Hilberg</i>		Date <i>04.12.2004</i>	
Residence: City <i>Wien</i>	State	Country <i>Austria</i>	Citizenship <i>DE</i>
Mailing Address <i>Pilgramgasse 18/22</i>			
Mailing Address			
City <i>Wien</i>	State	ZIP <i>A-1050</i>	Country <i>Austria</i>
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Armin		HECKEL	
Inventor's Signature		Date	
Residence: City <i>Biberach</i>	State	Country <i>Germany</i>	Citizenship <i>DE</i>
Mailing Address <i>Geschwister-Scholl-Strasse 71</i>			
Mailing Address			
City <i>Biberach</i>	State	ZIP <i>88400</i>	Country <i>Germany</i>
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Gerald Juergen		ROTH	
Inventor's Signature		Date	
Residence: City <i>Biberach</i>	State	Country <i>Germany</i>	Citizenship <i>DE</i>
Mailing Address <i>Akazienweg 47</i>			
Mailing Address			
City <i>Biberach</i>	State	ZIP <i>88400</i>	Country <i>Germany</i>

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Case No. 1/1390,1416

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DECLARATION

ADDITIONAL INVENTOR(S)
 Supplemental Sheet
 Page 2 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Thorsten		LEHMANN-LINTZ	
Inventor's Signature		Date	
Residence: City Ochsenhausen	State	Country Germany	Citizenship DE
Mailing Address Ameisenberg 1			
Mailing Address			
City Ochsenhausen	State	ZIP 88416	Country Germany
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Ralf R. H.		LOTZ	
Inventor's Signature		Date	
Residence: City Schemmerhofen	State	Country Germany	Citizenship DE
Mailing Address Schlusslerstr. 28			
Mailing Address			
City Schemmerhofen	State	ZIP 88433	Country Germany
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Ulrike		TONTSCH-GRUNT	
Inventor's Signature <i>U. Tontsch-Grunt</i>		Date 04 Dec. 2003	
Residence: City Baden	State	Country Austria	Citizenship AT
Mailing Address Oetkerweg 23			
Mailing Address			
City Baden	State	ZIP A-2500	Country Austria

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>3</u> of <u>3</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Jacobus C. A.		VAN MEEL	
Inventor's Signature		Date 4 Dec. 2003	
Residence: City Moedling	State	Country Austria	Citizenship NL
Mailing Address Weisses Kreuz Gasse 61			
Mailing Address			
City Moedling	State	ZIP A-2340	Country Austria
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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